Approved for use through 7/81/2008. OMB 0651-0032

U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE

DETERMINATION RECORD

Substitute for Form PTO-876										Application or Decket Number		
	,	APPLIC:	LICATION AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY			OTHER THAN SMALL ENTITY	
FOR.			NUMBER FILED .		NUA	NUMBER EXTRA		RATE (\$)	, FEE (\$)	7		
(87	OFR 1.16(a), (b), o	(O)) .					٦	1411-147	(CE(O)	7	RATE (\$)	FEE (\$)
SEARCH FEE (87 OFR 1.18(K), (1), or (m))				·		,	7		-	-		
EXAMINATION FEE (37 OFR 1.16(0), (p), or (q))				<del></del>	<del></del>	-	+		-	4		
TOTAL CLAIMS				······································			4					
(87 CFR 1.18(1)) INDEPENDENT CLAIMS			minus 20 =				J	× 25=		OR	x 50 .	
(37 CFR 1.16(h))			= 8 sunim					x /01 =			x 200.	
FE	PLICATION SIZE E CFR 1.16(8))	ls ad	If the specification and sheets of paper, the ap is \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a			size fee due Ir each fiemof . Soo					1005	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 4.16(1))							1	180		1	360	<del> </del>
* If the difference in column 1 is less than zero, enter "0" in column 2.							_	TOTAL		1		<del> </del>
APPLICATION AS AMENDED - PART II											TOTAL	
					/ - I AILL	•			:			
<del></del>	· .	(Cölumi CLAII			(Column 2)	(Column 3)		SMALL	ENTITY	OR	OTHE	R THAN ENTITY .
AMENDMENT#	4901	REMAIN AFTE AMENDI	IING R		HIGHEST NUMBER REVIOUSLY PAID EOR	PŘESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL
	Total (37 OFR 1.160)	(1.160)		nus · **	M	= /.		x-25=	(EB(3)		× 50=	FEE (\$)
	Independent (37 CFR 1.16(h))	•	20 Mi	nus **	1	= /	1	10		OR ·		
	Application Size Fee (37 CPR 1.16(s))				/_	<del></del>		× lo v=		OR	x 200	- 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (57 CFR 1.16(0))							180			360	
		: .				<del>:                                    </del>	1 1	TOTAL		OR	TOTAL	<del></del>
		(Column	. ·	1	4-4			ADD'L FEE		OR .	ADD'L FEE	
	1	CLAIM	S		(Column 2) HIGHEST	(Column 3)	1	·.			٠,	
AMENDMENT >	Total	REMAIN AFTER AMENDM	ENT.	PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL
	(37 CFR 1.16(1))		Min			=		X =				FEE (\$)
	Independent (37 OFR 1.16(N))	•	Mic	us •••		= .			<u>-</u>	OR	× =	
	Application Size Fee (37 CFR 1.16(s))						·ŀ	X · =		OR '	× =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))						- [					
				** ** ********************************		<del></del>	Ł	TOTAL ADD'L FEE		OR OR	TOTAL	
	If the entry in col If the "Highest No If the "Highest No The "Highest Nor	umber Prev	nously Pald lously Pald	For IN T	HIS SPACE I	s less than 20; i		L.	·	,	ADD'L FEE	

The Highest Number Previously Pald For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.